Zophin David Scott Form 3 January 11, 2018

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement TORCHMARK CORP [TMK] **Â** Zophin David Scott (Month/Day/Year) 01/01/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) AMERICAN INCOME LIFE (Check all applicable) INSURANCE CO, Â 3700 S. STONEBRIDGE DR. 10% Owner Director Officer (Street) __X__ Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) Exec Officer-Prin Subsidiary _X_ Form filed by One Reporting Person MCKINNEY. TXÂ 75070 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial (Instr. 4) Beneficially Owned Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Â Common Stock 0 D Common Stock 0 Ι N/A Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

1. Title of Derivative Security 2. Date Exercisable and 3. Title and Amount of 4. 6. Nature of Indirect (Instr. 4) **Expiration Date** Securities Underlying Ownership Beneficial Ownership Conversion (Month/Day/Year) Derivative Security (Instr. 5) or Exercise Form of

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		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Zophin David Scott AMERICAN INCOME LIFE INSURANCE CO 3700 S. STONEBRIDGE DR. MCKINNEY, TX 75070	Â	Â	Â	Exec Officer-Prin Subsidiary

Signatures

David S. Zophin by Carol A. McCoy, Attorney-in-fact

Date

01/11/2018

**Signature of Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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